2005-186.T 236058

## My Travels & Tours Inc. P.O. Box 365\ Hamlet, NC 28345 (704)975-4863

March 30, 2012

Public Service Commission of South Carolina 101 Executive Center Drive Suite 100 Columbia, South Carolina 29210 RECRIVED

APRIO 2012

CLERK'S OFFICE

Ref: Name Change:
From-Travel Tours Unlimited Inc of Hamlet
To-My Travels & Tours Inc.

Dear Sir:

I am sending this letter to the Public Service Commission of South Carolina for the purpose of a name change. The original name for this corporation is <u>Travel Tours Unlimited Inc of Hamlet</u>. The name for the new company is to be amended and the new name is <u>My Travels & Tours Inc.</u>, The insurance company has been requested to send a new Form E for the new company named above. Included in this letter is a copy of the Articles of Incorporation for My Travels & Tours Inc. My Travels & Tours Inc., will operate the same as Travel Tours Unlimited Inc of Hamlet operated--from points in South Carolina to points in South Carolina. If any additional information is needed, please inform.

Bronson Medley. President

Enclosure: Copy of Articles of Incorporation

FAX NO. : 910 582 5899



## State of North Carolina Department of the Secretary of State

## ARTICLES OF INCORPORATION

SOSID: 1222609
Date Filed: 9/22/2011 2:46:00 PM
Elaine F. Marshall
North Carolina Secretary of State
C201124300027

| Т   | he name of the corporation is:   | My Travels & Tours, Inc  |  |                             |  |  |  |
|-----|--|--|--|-----------------------------|--|--|--|
|     | The number of shares the corpora   | •  |  |                             |  |  |  |
|     |  |  | ide is. 100,000  |                             |  |  |  |
| T   | These shares shall be: (check eith   | er a or h)   |  |                             |  |  |  |
| а   | a. I all of one class, designated as common stock; or  |  |  |                             |  |  |  |
| b   | divided into classes or swith the information re   | series within a class as p<br>quired by N.C.G.S. Sec   | provided in the attached soltion 55-6-01.                            | hedule,                     |  |  |  |
| 1   | The street address and county of the initial registered office of the corporation is:  |  |  |                             |  |  |  |
| ١   | Number and Street 320 Perry W  | filliams Road  |  |                             |  |  |  |
|     | City Hamlet  |  | Zip Code28345  | County Richmond             |  |  |  |
| . 1 | The mailing address, if different from the street address, of the initial registered office is:  |  |  |                             |  |  |  |
|     |  | _  |  |                             |  |  |  |
|     | Number and Street P.O. Box 36  |  | 20045  | Cistmond                    |  |  |  |
|     | Number and Street P.O. Box 36  City Hamlet   |  | Zip Code 28345   | County Richmond             |  |  |  |
| (   |  | State_NC   |  | County Richmond             |  |  |  |
| ,   | City_Hamlet  | State NC  Agent is: Branson K.   | Medley   | County Richmond             |  |  |  |
| . 1 | City Hamlet The name of the initial registered   | State NC  Branson K.  ust select either a or b.  | Medley   | County Richmond             |  |  |  |
| . 1 | City Hamlet  The name of the initial registered  Principal office information: (m  a. The corporation has a  | State NC  I agent is: Branson K.  ust select either a or b.  principal office.                                       | Medley<br>)  | County Richmond             |  |  |  |
| . 1 | City Hamlet  The name of the initial registered Principal office information: (max.)  The corporation has a limit that the street address and county of    | State NC I agent is: Branson K.  ust select either a or b.  principal office.  The principal office of               | Medley ) the corporation is:   |                             |  |  |  |
| , 1 | City Hamlet  The name of the initial registered Principal office information: (max.)  The corporation has a street address and county of Number and Street | State NC I agent is: Branson K.  ust select either a or b.  principal office.  The principal office of               | Medley  ) the corporation is:  |                             |  |  |  |
| . 1 | City Hamlet  The name of the initial registered Principal office information: (max   | State NC I agent is: Branson K.  ust select either a or b.  principal office.  The principal office of  State  State | Medley ) the corporation is:  Zip Code                               | _County                     |  |  |  |
| . 1 | City Hamlet  The name of the initial registered Principal office information: (max.)  The corporation has a street address and county of Number and Street | State NC I agent is: Branson K.  ust select either a or b.  principal office.  The principal office of  State  State | Medley ) the corporation is:  Zip Code                               | _County                     |  |  |  |
| . 1 | City Hamlet  The name of the initial registered Principal office information: (max   | State NC I agent is: Branson K.  ust select either a or b.  principal office.  The principal office of  State  State | Medley  the corporation is: Zip Code  ss. of the principal office of | County  The corporation is: |  |  |  |

| Any other     |   |                |                                      |  |  |  |
|---------------|---|----------------|--------------------------------------|--|--|--|
|               | The name and address of each incorporator is as follows:    |                |                                      |  |  |  |
| Branson k     | Branson K. Medley, President P.O. Box 365, Hamlet, NC 28345 |                |                                      |  |  |  |
|               |   |                |                                      |  |  |  |
|               |   |                |                                      |  |  |  |
|               |   |                |                                      |  |  |  |
|               |   |                |                                      |  |  |  |
| -             |   |                |                                      |  |  |  |
|               |   |                |                                      |  |  |  |
| These estic   | as will be affective upon                                   | filing unle    | ess a date and/or time is specified: |  |  |  |
| These artic   | es will be effective upon                                   | n filing, unle | ess a date and/or time is specified: |  |  |  |
| These artic   | es will be effective upon                                   | n filing, unle | ess a date and/or time is specified: |  |  |  |
| . These artic | es will be effective upon                                   | n filing, unle | ess a date and/or time is specified: |  |  |  |
|               | es will be effective upon                                   | n filing, unle | ess a date and/or time is specified: |  |  |  |
| These artic   |   |                | ess a date and/or time is specified: |  |  |  |
|               |   |                |                                      |  |  |  |
|               |   |                | My Travels & Tours, Inc              |  |  |  |
|               |   |                |                                      |  |  |  |

Branson K. Medley

Type or Print Name and Title

**INCORPORATOR**